

KIRKBY-IN-ASHFIELD  
URBAN DISTRICT  
COUNCIL.

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ANNUAL REPORT  
FOR 1913.

BY

H. S. MAXWELL,  
MEDICAL OFFICER OF HEALTH.

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East Kirkby :

Printed by A. Moore, at the Phoenix Printeries, Cemetery Road.

# Kirkby-in-Ashfield Urban District Council.



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## **Assistant Overseer :**

PERCY CUPIT

# REPORT.



To the Chairman and Members  
of the  
Kirkby-in-Ashfield Urban District Council.



GENTLEMEN,

I beg to submit to you my first Annual Report on the health and sanitary conditions of your district. In doing so I may mention I have only held office since July, 1913, and am therefore relying for my information and details for part of the year on facts recorded by my predecessor, to whom, in my final remarks, I shall make further reference.

Facts which are well known to yourselves must be detailed as required by the Local Government Board, namely, the physical features of the district, which com-

prises an acreage of 5,814 acres, and is divided into three wards, namely, East, West and South. The East and West Wards are comprised of two well arranged districts, the habitations in each being surrounded with a good area of farming land and available freehold building land. The South Ward comprises two well arranged villages, and several hamlets. The hamlets being made up of houses which under present day government combined with the powers delegated to local authorities would not have been allowed to be erected.

The physical features vary. In the East Ward we have a stratum of rock of slightly varying character and thickness, chiefly composed of magnesium limestone. With regard to the soil, we find a layer of sand of considerable depth, this layer being covered by a light sandy loam of varying depth. In the West Ward the limestone is covered with a layer of loam, which becomes deeper and stronger in a south-westerly direction. Beds of clay occur in the East and South Wards. The conditions prevailing in the West Ward apply generally to the South Ward.

The average altitude is about 530 feet above sea level. The district is a hilly one, and in three of the valleys rivers have their sources, namely, the Leen on the south-east boundary, the Maun on the north, and the Erewash in the centre of the district. The geographical arrangement is naturally conducive to satisfactory drainage.

The district is supplied with two railways, a third passing through without rendering any service, except mineral. A fourth is at present being constructed which, when completed will furnish accommodation for passenger, mineral and goods traffic.



The population at the census 1911, was 15,379, and the estimated population in 1913 was 16,740. The population is composed mainly of working class people, the majority of whom are coal miners, the remainder being railway employees, factory and hosiery workers, and farm labourers.

With regard to the incidence of disease, apart from infectious cases, the chief causes of death appear to be pneumonia and bronchitis in children under one year and persons over 45 years of age. The prevalence of these causes at these particular ages will have to be separately accounted for. In the case of those over 45 years the climatic change of temperature to which they have been subjected daily in following their occupation of mining, renders them more liable to local disorganization of circulation, consequently local congestion which usually results in the case of the respiratory organs in pneumonia or bronchitis.

There is also another fact. Whilst some have learned the value of fresh air and well ventilated living rooms there are a large number of residents homes where much fresh air and sunlight when available is excluded, and at the same time a high fire is kept constantly burning irrespective of the climatic conditions which may prevail. This condition of affairs causes a high temperature in the atmosphere of the dwelling or occupied room resulting usually in lowering the vitality of the occupants whether sick or otherwise rendering them more susceptible to illnesses.

## PART I.

The estimated population of the Urban area for the year 1913 is 16,740, divided in the three Wards as follows :—

	East	West	South
Occupied houses ...	1537	961	850
Unoccupied houses ...	nil	3	9
Population ...	7685	4805	4250

Birth-rate.

During the year 505 Births were registered in the district and one transferred from an outside institution to this district, making a total of 506 for the year. This gives an annual birth-rate of 30·16 per 1000 of the population, being an increase on the preceding year, the birth-rate of which was 474, being 28·5 per 1000 of the population. During the last 10 years the birth-rate of the whole district has gradually decreased from 39·1 per 1000. It seems strange that there is a decrease in the percentage of births for the past 10 years, in spite of the fact that there is an increase in the percentage for 1913 compared with 1912.

These figures lead to remarks which one feels his duty to record. Recent Local Government Acts, Permanent Midwives Act, Notification of Births Act., etc., tend or are intended to the comfort of the parent and child and to the prevention of practices which are suggested by canvassers and others of nefarious and iniquitous trade often increasing the death-rate of women and diminishing a natural increase in the birth-rate of the district. Legal steps ought to be taken to prevent the sale of drugs to innocent and unsuspecting females to whom they are advocated and recommended for a purpose contrary to which they are intended.

One hundred and eighty-three deaths were registered in the district. This gives a local death-rate of 10·9 per 1000 population. Added to this number we have 13 other deaths transferred from hospitals and other public institutions outside the district, making a total of 196 deaths, equal to a death-rate of 11·7 per 1000 population. Death-rate.

If you will refer to Table III. in the Appendix, it will be noticed that 61 deaths of infants were under the age of one year, equal to 31 per cent. of the total. At the age of one year and under two years, 15 deaths were recorded, equal to 7·6 per cent. Taking a longer span, from two years to 45 years, only 36 deaths are recorded, equal to 18·3 per cent. During the next 20 years of life, that is between 45 to 65 years, 34 deaths occurred, equal to 17·3 per cent. At the age of 65 years and upwards, 36 deaths are recorded, equal to 18·3 per cent.

It is an interesting fact to note that out of the last-named 36 deaths 10 of these were between 65 and 70 years of age, 16 were between 70 and 80 years of age, and 10 had passed their 80th birthday.

It is worthy of recording from statistics that in spite of the fact that your district is made up of a population who daily incur the risk of accidents (sometimes fatal) that the death-rate compares favourably with adjoining districts.

The average death-rate for 10 years—1902-1911—per 1000 population being :—12·1 Kirkby-in-Ashfield, compared to 14·0 and 14·5 in neighbouring districts.

TABLE I.

Showing births in wards :—

	East Ward	West Ward	South Ward	Totals
1st Quarter ...	51	40	26	117
2nd Quarter ...	63	36	33	132
3rd Quarter ...	71	34	37	142
4th Quarter ...	67	25	202	114
Totals 1913...	352	135	118	505
Totals 1912...	236	125	110	471
Totals 1911...	236	167	124	527
Totals 1910...	249	152	120	521
Totals 1909...	254	191	134	579
Totals 1908...	226	179	138	543
Totals 1907...	236	165	134	535
Totals 1906...	237	158	118	513
Totals 1905...	211	161	123	495
Totals 1904...	238	122	161	521



Births occurred quarterly as follows:—

					Illegitimate			
					Males	Females	Males	Females
1st Quarter	...	57	...	57	...	—	...	3
2nd Quarter	...	56	...	71	...	3	...	2
3rd Quarter	...	58	...	80	...	1	...	4
4th Quarter	...	57	...	50	...	3	...	4
					228	258	7	12
Totals 1912	...	226		227		9		9
„ 1911	...	265		237		13		12
„ 1910	...	274		231		6		10
„ 1909	...	297		261		7		14
„ 1908	...	264		262		7		11
„ 1907	...	249		267		12		7
„ 1906	...	250		247		10		6
„ 1905	...	259		236				
„ 1904	...	281		240				

Ward birth-rate for:—

		East Ward	West Ward	South Ward
1913	...	32'7	28'4	27'4
1912	...	30'7	26'1	26'3
1911	...	44'7	31'7	22'7
1910	...	32'3	30'8	27'4
1909	...	33'5	38'8	30'7

Birth-rate for the last 10 years for whole district :—

1913	...	30·1	per 1000 of the population
1912	...	28·5	„ „
1911	...	34·2	„ „
1910	...	30·6	„ „
1909	...	34·3	„ „
1908	...	33·0	„ „
1907	...	33·3	„ „
1906	...	32·7	„ „
1905	...	34·2	„ „
1904	...	37·8	„ „

TABLE II.

Showing deaths at all ages in Wards :—

	East Ward	West Ward	South Ward	Totals
1st Quarter ...	35	14	10	59
2nd Quarter ...	20	14	7	41
3rd Quarter ...	17	6	11	34
4th Quarter ...	23	15	11	49
Totals 1913...	95	49	39	183
Totals 1912...	93	53	39	185
Totals 1911...	85	40	40	165
Totals 1910...	90	71	52	
Totals 1909...	80	76	44	
Totals 1908...	72	68	54	
Totals 1907...	81	41	41	
Totals 1906...	63	63	52	
Totals 1905...	64	50	48	
Totals 1904...	69	47	59	

Deaths occurring quarterly :—

		Males		Females		Total
1st Quarter	...	35	...	24	...	59
2nd Quarter	...	24	...	17	...	41
3rd Quarter	...	10	...	24	...	34
4th Quarter	...	19	...	30	...	49
		<hr/>		<hr/>		<hr/>
		88		95		183
Totals 1912	...	102		83		185
„ 1911	...	92		73		165
„ 1910	...	118		95		213
„ 1909	...	113		87		200
„ 1908	...	92		102		194
„ 1907	...	83		30		113
„ 1906	...	85		93		178
„ 1905	...	80		76		162
„ 1904	...	104		74		178



## Infantile Mortality.

Infantile  
Mortality

The 61 deaths of infants under one year gives an infantile mortality for the past year of 120·7 per 1000 births. This is an improvement on the previous year, which was 123 per 1000. In 1911 it was 132·8 per 1000. This, in fact, is the lowest on record, with two exceptions—1903 and 1907—since the inception of the Council in the year 1896, when the mortality of infants was 186·9 per 1000, and the general death-rate 18·5 per 1000. The decrease during the last two years justifies amply the action of the Council in engaging the services of a Health Visitor, whose work of educating the parents in the proper feeding, clothing, and necessity of fresh air for infants, is undoubtedly a great factor in averting the high death-rate.

The question of infantile mortality opens up a wide field for discussion on various points, bearing directly and indirectly on the subject.

The teaching of elementary hygiene in the schools should have a good moral effect in the local conditions of life, and this subject should be instilled into the minds of the children whilst at school, so that we hope to look to the rising generation for the adoption, hygienic and otherwise, of the conditions which tend to further longevity of life and a smaller death-rate in children.

It is almost a hopeless task to teach some of the parents of to-day the value and importance of hygiene, having become so accustomed to live in rooms which they use every day, to exclude the air, and, in some cases light, and keep their offspring in front of, or near to, a roasting fire—“to keep the baby warm!” as they express it.

In such conditions, the house-fly swarms and multiplies, carrying disease and death in its train. Such surroundings predispose the helpless infants to sicknesses

which often prove fatal.

Alcoholism is another serious item which has dire results on infant life indirectly.

The milk supply is a most important question, both with regard to infants particularly and to the public generally.

The public milk supply is dealt with in Part III. of this report, but the point now in question is, how is the milk kept in the home after being delivered by the dairy-men? In many cases it is received in a utensil of doubtful cleanliness, and placed on the table, or other convenient place, in the "living" room, generally in a sometimes polluted atmosphere, and is exposed to dust and flies, and in such conditions milk is liable to decomposition and deposits, which when used for human consumption (in many indisputable cases) is the cause of such diseases as tuberculosis, enteric, and diphtheria. When the milk is delivered, it should be taken in a clean vessel, placed in a cool position, and covered in such a manner as to exclude all foreign matter.

Premature birth, atrophy, debility, and marasmus are always accountable for a number of deaths in infants—in this district to the extent of 47·5 per cent. of the deaths. On this question much might be said as to what may reasonably be termed the havoc in infant life.

Many factors prevail, according to the sentiment, also social and financial conditions, of the population generally, which decide the natural increase of the population, or in some cases the desired and personal suppression of an increase.

In reference to Table IV., you will notice pneumonia accounted for 18 deaths, convulsions 9, prematurity, atrophy, and marasmus 29. Nine of the deaths were those of illegitimate infants, out of 19 illegitimate born. The rate of illegitimates is usually high, and this year it reaches the high figure of 473·7 per 1000 births.

## Zymotic Diseases.

During the year 163 cases of infectious disease were notified, as against 83 last year, the increase being caused by an epidemic of Scarlet Fever, which accounted for 86 notifications. The epidemic was, and is still, of a somewhat mild type, which has not necessarily caused any sickness in the child for more than three days, or developed symptoms which would be serious enough to suggest to those responsible any necessity to summon medical advice.

The result of this fact has been, in my opinion, partly accountable for the continuous prevalence of the disease, presumably augmented by the fact that the epidemic referred to seems to have its origin with (and is more prevalent in) those districts where places of amusement are situate, and more particularly where in those places of amusement special entertainments are held for children, as borne out not only by local, but by county statistics.

In such structures as places of amusement, more particularly picture palaces, where, for the success of their work, sunlight, the natural purifier of the air, and daylight is altogether excluded, making such places favourable grounds for germ life. As a redeeming feature, I venture to suggest that the authority which grants a licence to these places should specify in such licence periodical and efficient disinfection for public safety.

Typhoid Fever. Nine cases of Typhoid Fever occurred during the year—seven in the East Ward and two in the West Ward. They were all of a more or less mild type, and no deaths occurred. With regard to the incidence of these cases, one case in the East Ward and one case in the West Ward occurred in houses where Typhoid had already been over twenty years ago, previous to local sanitary arrangements being under the control of the local sanitary authority.



Nine cases of this disease occurred—one from the East Ward, two from the West Ward, and six from the South Ward. One death was recorded from Membranous Croup, no notification of which was received by me.

Diphtheria—  
including  
Membranous  
Croup

Eighteen cases were notified. The East Ward accounted for eight, the West Ward two, and the South Ward eight.

Erysipelas

The disease accounted for the death of one infant.

Thirty-four cases of Pulmonary Tuberculosis were notified, namely:—

Tuberculosis

East Ward	West Ward	South Ward
19	12	3

Since this disease has been made notifiable, it has revealed the fact that more people are suffering from Pulmonary or other forms of Tuberculosis than was suspected.

It is a medical and bacteriological fact, proved on scientific investigations, and recognised to be correct, that contrary to the ideas prevailing, professionally and publicly, the subject and consequences of Tuberculosis did not command the attention and thought necessarily conducive to the arrest, much less the cure, of this disease.

Tuberculosis is synonymous medically, with the word “Consumption,” which condition is generally understood to be lung trouble, and incurable.

Far from it. Cases of an age when sufficient education which developed the necessary correlative ideas suggested and advocated by local population to eventually adopt Acts of Parliament which will conduce to local reforms and conditions tending to the eventual hoped for abolition of Tuberculosis. Under present day Government,

certain Acts of Parliament have been put into actual operation. Henceforth, Acts of Parliament dealing with the health of the people, and with diseases of the public generally and more especially with such diseases and subsequent results as those depending on tuberculebacilli, and are accountable for so many deaths at an age when they are responsible or a greater part of them, when death overtakes them at that particular age when they would be useful as citizens or residents but more especially as parents.

In dealing with the question of Tuberculosis, a certain misunderstanding seems to prevail in the minds of those people who eventually find it necessary to seek medical advice through some indisposition apparently indefinite but generally pectoral. These people are generally of an age ranging from 16 to 45 years an age the abolition of which in working-class districts is not only a serious loss to the population and community but a very serious loss to the family to which they belong.

Supplementary to the Parliamentary suggestions and advancing ideas both for domestic comfort and otherwise, combined with the gradual adoption of these methods by local minor officials, Tuberculosis medically has not been considered of such importance as would induce the Local Government Board to suggest or insist on compulsory notification of the disease until 1911. Consequently, subordinate authorities hesitated in adopting any kind of local scheme which might become sanctioned by Act of Parliament.

Recent legislation has considered it a national duty to provide for the arrest by sanatoria and other treatment of insured persons. Unfortunately a great number of other persons have no provision made for them. I would

like to see a national movement adopted by which *all* tuberculous patients who so desired could be treated. For the year 1912, 110,551 cases of Pulmonary Tuberculosis were notified in the whole of England and Wales plus 31,190 other Tuberculous cases.

These figures amply justify the foregoing remarks supplemented by the fact that in Nottinghamshire alone the deaths from Pulmonary Tuberculosis numbered 234, and other Tuberculous diseases 130, making a total of 364.

With regard to your district deaths from Tuberculosis in all forms numbered 20—16 of whom were between the ages of 16 and 65 years. Estimating the earning capacity on economic lines, this means an estimated loss to the district of £1,050.

## **Non-Notifiable Zymotic Diseases.**

**Measles**            Measles have been practically absent from the district during the year.

**Influenza**        A disease of an infectious nature and in different epidemics of varying symptoms (often, if neglected), of a treacherous character, lead to complications chiefly pulmonary or neurotic, eventually resulting in pneumonia or nervous depression.



## Non-Zymotic Diseases.

Five deaths were registered from Cancer or Malignant Cancer Disease. The cause of this dread disease has not up to the present been possible to combat to the same extent as a disease such as Diphtheria which years ago accounted for a large number of deaths but now, owing to medical and bacteriological research, and better sanitary conditions, it is hoped that the disease will eventually disappear or almost become unknown. With regard to Cancer, the cause is undecided but from personal observation I am inclined to think that in certain districts or parts thereof it is endemic.

Organic Heart Disease accounted for five deaths.

Heart disease

From Bronchitis, 22 deaths—three under 1 year, one under 2 years, ten between 45 and 65, and eight over 65 years.

Disease of the  
respiratory  
organs

Pneumonia claimed 25 victims. Thirteen of these were infants under 1 year, six under 2 years, one between 5 and 15 years, one between 15 and 25, two between 45 and 65, and two over 65 years.

One death is recorded from Enteritis—a small percentage in consideration of its prevalence which is in many cases due to the consumption of preserved foods in preference to freshly-cooked material.

Nephritis was accountable for two deaths.

Nephritis

Two Suicides, both by drowning, were recorded.

Suicides

Four Fatal Accidents were recorded.

Violent deaths

Forty-eight deaths were registered from other defined diseases, including one uncertified case, which occurred in the East Ward.

Un-classified

Midwives Act

A gratifying result of recent Acts of Parliament tending to reforms in the treatment of Confinements has resulted in the fact that no case of Puerperal Fever occurred in the district during the year. Further, that only a small proportion of cases of Ophthalmia Neonatorum came under my notice.

## PART II.

### Infantile Mortality.

	East		West		South		Total
	Ward		Ward		Ward		
1st Quarter ...	13	...	4	...	3	...	20
2nd Quarter...	8	...	—	...	1	...	9
3rd Quarter ...	4	...	3	...	5	...	12
4th Quarter ...	11	...	6	...	3	...	20
	<hr/>		<hr/>		<hr/>		<hr/>
	36		13		12		61
	<hr/>		<hr/>		<hr/>		<hr/>

Whole Infantile Death-rate per 1000 Births, 120·7

Infantile Death-rate per 1000 births in Wards :—

		East Ward	West Ward	South Ward
1913	...	142·8	96·3	101·7
1912	...	114·4	104·0	154·5
1911	...	152·5	107·7	129·0
1910	...	136·5	177·6	125·0
1909	...	114·1	167·5	111·9

TABLE I.

		Under 1 year	1 and under 5	5 and under 15	15 and under 25	25 and under 45	45 and under 65	65 and over	Totals
Diphtheria	...	—	1	7	—	1	—	—	9
Erysipelas	...	1	—	1	—	3	6	7	18
Scarlet Fever	...	—	25	53	6	2	—	—	86
Enteric Fever	...	—	1	6	1	—	1	—	9
Pulmonary Tuberculosis	...	—	—	4	9	16	4	1	34
Other Tubercular Diseases	...	—	2	2	2	1	—	—	7



TABLE II.

		East Ward	West Ward	South Ward
Diphtheria	...	1	2	5
Erysipelas	...	8	2	8
Scarlet Fever	...	39	42	5
Enteric Fever	...	7	2	...
Phthisis	...	19	12	3
Other Tubercular Diseases	...	5	1	1

TABLE III.

		January	February	March	April	May	June	July	August	September	October	November	December	Total
Diphtheria	...	1	1	3	1	...	...	...	1	2	...	...	...	9
Erysipelas	...	...	...	2	1	...	1	2	2	2	1	2	5	18
Scarlet Fever	...	2	1	4	...	1	12	14	15	5	4	8	20	86
Enteric Fever	...	1	1	...	...	...	...	2	1	1	3	...	...	9
Phthisis	...	...	10	5	3	4	1	3	2	1	1	2	2	34
Other Tubercular Diseases	...	2	3	...	...	...	...	...	...	...	2	...	...	7

## PART III.

### Water supply

The Water Supply of your District still remains very good. The new engines put down are working satisfactorily. Something like 350,000 gallons is a daily average, and the wells still maintain a head of water of 52 feet which in consideration of mining operations in the district is very gratifying. The lack of pressure in the Church-street district, causing at times an intermittent supply, is dangerous to the health in that particular district and often causes considerable waste of water.

The Council, however, in recent proposals, intend to deal with this defect, and are proposing to erect a large storage tank in that vicinity, and thus ensure a constant supply.

The district has cause for gratitude in owning one of the best water supplies in England as borne out by the fact made public by an enthusiastic Pressman who had made investigations all over England, and finally classified the quality of the water of Kirkby after analysis amongst the first six best water supplies in the country. In fact, I think it was second.

### Sewage

The new additional sewage scheme has been completed at a cost of over £11,000. The sewer in a portion of Victoria Road has been taken out and re-laid with 12-inch pipes, on an improved gradient.

An improvement has also been carried out in the sewers in Prospect Street and Low Moor Road. A new line of sewer has been laid from the Outfall Works in Park lane to the summit of Low Moor Road, a distance of over two miles, in the course of which several connections have been made with the old sewer. These connections will relieve the old sewer when its capacity is overtaxed, and the

flooding which occurred at various points in times of storm or excessive flow should be obviated. The Outfall Works have been re-modelled, a new screen and a detritus tank have been constructed.

The new tank, with hopper-shaped bottom, makes the removal of sludge from the tank a very simple process without reducing the head of water. A portion of the old filtering area has been transformed into sludge beds.

The large tank is now set apart for the treatment of storm water. Considerable improvement has been carried out at this tank, and it is hoped to prove very efficient in times of storm. Its capacity is now about 168,000 gallons.

Two new percolating filter beds, 100 feet in diameter, have been constructed, each with four distributing arms. These are fed automatically a short period elapsing after each flush giving time for filtration and aeration.

The filtering material is granite. The effluent during the first few weeks of working was very satisfactory. This, however, will improve as the system settles down.

The water from the sludge beds is drained off to a tank and afterwards pumped back by means of a gas engine to the detritus tank for treatment before being allowed to enter the river.

The whole of the work appears to have been carried out in a most satisfactory manner.

No steps have been taken to adopt suggestions regarding the drainage of Kirkby Woodhouse district, previously advocated by your officers.

The Local Government Board held an inquiry, in <sup>Refuse</sup> December last, into the Council's application to borrow <sup>Destructor</sup> £3,000, for the purpose of erecting a Refuse Destructor, on a site adjoining the Gasworks. The Inspector conducting

the inquiry was furnished with all details. The number of loads of refuse collected during the past year was 7,964, equal to over 6,000 tons.

The Destructor proposed is a two-cell back-feed type, and provision is made in the building for a further cell to be installed when the necessity arises. The Council are now waiting the Board's sanction, on receipt of which the work should be commenced immediately, as the disposal of refuse at the present time has become a difficult question.

#### Milk Supply

The desired improvement in the conditions under which milk cows are kept is very slow. The farmers and cowkeepers have grown so accustomed to their old and ancient methods, that to effect alterations is a very difficult task. On the whole, there is an improvement in the general conditions, and in the quality of beast kept for milking purposes.

The systematic inspection of cows by a veterinary surgeon has had the effect of bringing about this improvement in the cattle. Cowsheds to the number of 50 have been visited, and 281 cows examined during the year. Thirteen of these were affected with Tuberculosis, and the supply of milk from them for human consumption was stopped.

#### Closet Accommodation

The majority of the closets in the district are on the pail system, which number 2,454. There are 93 privies, 809 water closets, and two waste water closets.

The adoption of the water carriage system in new property is now made compulsory.

#### House Scavenging

Scavenging of the district is still carried on by the Council's own workmen.



The Slaughter-houses are all owned by private individuals or firms and are systematically visited when slaughtering is being carried out and at other times. Slaughter  
Houses

The quality of meat has during the year been very good. In some cases affected organs have been detected by the Sanitary Inspector, and destroyed.

This officer also seized 20lbs. of foreign meat which was exposed for sale in a shop. The meat was condemned by a Justice and was destroyed. The owner and salesman were cautioned by the Council, but no prosecution was made.

The slaughtering being done at varying times, and the slaughter-houses being spread all over the district, make the duty of inspection difficult. It would be much better if some uniformity in time of slaughter could be adopted.

The Slaughter-houses are licensed annually, and are situated :—

East Ward	West Ward	South Ward
8	4	8

The Factories and Workshops are subject to periodical inspection to ascertain their sanitary conditions. Factory and  
Workshops Act

There is a varying number of outworkers in the district, the average being about 130. A register of these is kept, and in case any infectious disease occurs in any house in which this work is carried out the cautions necessary to prevent the spread of same are at once taken.

Factories	Workshops	Work-places
4	17	10

The demand for houses at the present time is greater than the supply. The building trade in cottage property has been almost at a standstill during the year. Housing



Under the Housing and Town Planning Act, eight houses were condemned as being unfit for habitation, and closing orders were issued. The property was sold by the owner, and the purchaser gave an undertaking to make the houses habitable. This is being carried out.

Three other houses were also reported to the Council, and closing orders issued. These orders were temporarily suspended, on the owners undertaking to render the houses habitable.

#### School Accommodation

The School Accommodation in a growing district, to a great extent under an authority not so familiar with the conditions as the Local Authority, who are more or less subservient and whose recommendations are sometimes overruled, is tended to inadequate, and, at times, hurried, accommodation, in temporary buildings, not intended for every day school purposes.

Past experience and statistics of attendances have recently proved that in these temporary schools, which are generally and have been used for junior mixed children, especially in times of prevailing epidemics, show a much smaller percentage of attendances than those permanent schools specially intended for every day education.

Other temporary wooden buildings had to be erected to meet the necessary accommodation of the growing population. These buildings are unsuitable, on account of the difficulty of proper and regular maintenance of the temperature and the varying and sometimes sudden changes of atmospheric temperature which we encounter in this district. For instance, in one school which I recently visited, evidently not due to any mismanagement or effort on the part of the teachers, the temperature varied 30 degrees in adjoining classrooms. This is not a satisfactory condition of affairs, because if the classes are

changed several times from one room to another in such varying temperatures, the children naturally cannot adapt themselves to such sudden altered conditions. The approach to Portland Row School is of a very primitive and unsatisfactory condition, and in wintry seasons, especially in times of snowstorms, must be altogether unrecognisable to the children.

The midden privies existing at this school, made up of four closets, emptying into one midden, and six pail closets, especially with a small sewerage disposal works in close proximity, should not exist.

At the present time, a large and commodious school is being erected, which will evidently for some time relieve the congestion, and abolish the necessity of engaging temporary buildings, and thus concentrate the supervision administrative, both educationally and medically.

Recreation Grounds are a necessary perquisite to a <sup>Recreation</sup><sub>Grounds</sub> growing and thickly populated district. In your district, what was termed "The Quarries," originally, was always available to the public, and the residents, through their elected representatives, deemed it necessary to have a legal claim for the privilege of enjoying fresh air.

Subsequently, an additional Recreation Ground was leased in Church Street district, and afterward in Nuncargate district from his Grace the Duke of Portland.

At the time of writing this report, it has been made public and recognised by his Grace in his generous spirit, and on the occasion of the coming-of-age of his son the Marquis of Titchfield, future heir to the title, his interest in one of his districts of which he is Lord of the Manor, to present to the district the three Recreation Grounds mentioned.

## Public Baths

A further suggestion I should like to make, in spite of the necessarily heavy expenses in reforms you have incurred, is what I consider a scheme for the provision of Baths and Swimming Baths, not only for hygienic purposes in the case of adults, but educational purposes in the case of children.

Reverting to my opening paragraph, in which I mentioned I should make further reference to my predecessor, I consider it an honour, in competitive selection, to succeed a man of the type and ability of the late Dr. Mackenzie. He was a man of keen professional ability, combined with acute observation on matters tending to the furtherance of sanitary conditions in the district.

Further, let me thank the Members of the Council who deemed it conducive to the furtherance, maintenance, and, if possible, advancement of ideas which may tend to better sanitary conditions, eventually causing less administrative or compulsory jurisdiction on the part of the Local Authority.

These views I, as your Medical Officer, will attempt to justify, and put into operation.

In conclusion, let me say that my best thanks, for, in my opinion, discharging the duties actively, are due to the courtesy and assistance of Mr. W. Massey, one of the most able and energetic men to hold the position of Sanitary Inspector.

Yours obediently,

H. S. MAXWELL, M.O.H.

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# Appendix.

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Summary of work done in Sanitary Inspector's Department during the year 1913:—

	Informal Notices	Legal Notices by authority of Council	Nuisances abated after Notice	In statu quo
Dwelling-houses—				
Insanitary           ...           ...	12	4	12	—
Overcrowding   ...           ...	—	—	—	—
Privies, Ashpits, and Pail Closets...	115	—	115	—
Defective Drainage   ...           ...	54	—	54	—
Yards to be paved   ...           ...	4	2	2	2
Offensive Trades   ...           ...	1	—	1	—
Cowsheds, etc.       ...           ...	2	1	1	1



# NOTIFICATION OF BIRTHS ACT, 1907.

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## LADY HEALTH VISITOR'S REPORT.

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TO THE CHAIRMAN AND MEMBERS  
OF THE

KIRKBY-IN-ASHFIELD URBAN DISTRICT COUNCIL.

GENTLEMEN,

I have pleasure in submitting to you my Annual Report for the year 1913.

As I only commenced duty here in August last, and a period of about two months had elapsed from the time my predecessor left, the record of work is necessarily somewhat broken.

During the year the number of first visits paid were 534, and re-visits 1886, making a total of 2,320 visits.

The number of visits made are regulated according to the condition of the health of the child and the habits of the parent.

The Births registered were	...	505
„ notified „	...	479
„ not notified „	...	26
Illegitimate Births	„ ...	19
Stillbirths	„ ...	11
Deaths	„ ...	61
Deaths, under 1 week	... ..	18
„ „ 1-2 weeks	... ..	1
„ „ 2-3 „	... ..	1
„ „ 3-4 „	... ..	1
„ „ 1-3 months	... ..	12
„ „ 3-6 „	... ..	7
„ „ 6-9 „	... ..	10
„ „ 9-12 „	... ..	11

Breast fed up to and over 1 month	...	76	=	16·8	per cent.
„ „ „ 3 months	...	46	=	10·1	„
„ „ „ 6 months	...	230	=	50·0	„
Breast and artificial feeding combined	...	58	=	17·1	„
Wholly artificially fed	...	41	=	9·0	„

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Total	...	...	451
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Deducting 18 deaths under one week :—

Breast fed	...	...	...	14	=	32·5	per cent.
Breast fed up to three months	...	...	...	4	=	9·5	„
Breast fed and artificial feeding combined...	...	...	...	7	=	16·2	„
Wholly artificially fed	...	...	...	18	=	41·8	„

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Total	...	...	43
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Sixty-one deaths under one year of age occurred during the year, giving an infantile death-rate of 120·7 per 1000 births.

Your obedient servant,

A. F. FAWCETT,

Health Visitor.

TABLE I.  
Vital Statistics for whole District during 1913 and previous years.

Year	Population esti- mated to middle of each year	Births			Total Deaths in District		Deaths of non- residents regis- tered in district	Deaths of resi- dents registered beyond district	Total Deaths belonging to the District			
		Un- corrected Number	Number	Rate	Number	Rate			At all ages			
									Under 1	Rate	No.	Rate
1908	16442	543	...	33.0	194	11.8	...	8	66	139.9	199	12.1
1909	16834	579	...	34.3	187	11.1	...	13	76	131.2	200	11.8
1910	17000	521	...	30.6	207	12.1	2	8	76	145.5	213	12.5
1911	15379	527	...	34.2	165	10.7	3	7	70	132.8	169	10.9
1912	16625	471	528	28.5	185	11.1	1	8	58	123.1	192	11.5
1913	16740	505	506	30.16	183	10.9	...	13	61	120.7	196	11.7

Total Population at all ages at Census, 1911 :—15,379.

Area of Disirict in acres (land and inland water), 5,814.

Number of Inhabited Houses, 3198.

Average Number of Persons per House, 4'8.

TABLE II.

Cases of Infectious Disease notified during the year 1913.

Notifiable Diseases	Cases notified in whole district.										Total cases notified in each locality			Total cases rem'v'd Hospl.
	At all ages	Under 1 year	1 to 5 years	5 to 15 years	15 to 25 years	25 to 45 years	45 to 65 years	65 and upward	East Ward	West Ward	South Ward			
Diphtheria ...	9	...	1	7	...	1	...	...	1	2	6	...		
Erysipelas ...	18	1	...	1	...	3	6	7	8	2	8	...		
Scarlet Fever ...	86	...	25	53	6	2	...	...	39	42	5	...		
Enteric Fever ...	9	...	1	6	1	...	1	...	7	2	...	...		
Pul. Tuberculosis	34	...	...	4	9	16	4	1	19	12	3	...		
Other Forms of Tuberculosis...	7	...	2	2	2	1	...	...	5	1	1	...		
Totals	163	1	29	73	18	23	11	8	69	61	23	...		

Isolation Hospital  
or Hospitals  
Sanatoria &c.

{
A Small-pox Hospital (16 Beds) belonging to the Urban District Council.  
The Council have an Agreement with the Basford Rural District Council for other  
Infectious Cases to be treated in that Authority's Hospital when necessary.
}

TABLE III.

## Causes of, and ages at Death during 1913.

Causes of Death	Deaths in or belonging to whole District at subjoined ages								
	All ages	Under 1	1 and under 2	2 and under 5	5 and under 15	15 and under 25	25 and under 45	45 and under 65	65 and upwards
Measles ...	3	1	1	.. 2	1	..	..	..	..
Scarlet Fever ...	2	..	..	1	..	..	..	..	..
Diphtheria and Croup ...	1	..	..	..	..	..	..	..	..
Erysipelas ...	1	1	..	1	1	3	4	3	1
Phthisis ...	14	1	..	..	1	1	..	..	..
Tuberculous Meningitis...	2	..	..	..	..	2	1	1	..
Other Tuberculous Diseases	4	..	..	..	..	..	1	4	..
Cancer ...	5	..	..	..	..	..	..	..	..
Meningitis ...	3	2	..	..	1	..	..	..	2
Heart Disease ...	5	..	..	..	..	..	..	3	2
Bronchitis ...	22	3	1	..	..	..	..	10	8
Pneumonia ...	25	13	6	..	1	1	..	2	2
Other Diseases of Respiratory Organs	2	..	..	..	..	..	..	1	1
Diarrhoea ...	1	..	1	..	..	..	..	..	..
Cirrhosis of Liver ...	1	..	..	..	..	..	..	..	1
Nephritis and Bright's Disease	2	..	1	..	..	..	..	1	..
Accidents and Diseases of Pregnancy and Parturition ...	2	1	..	..	..	..	1	..	..
Congenital Debility &c., including Premature Birth ...	33	29	4	..	..	..	..	..	..
Violent Deaths, excluding Suicide	4	..	..	..	..	2	1	1	..
Suicide ...	2	..	..	..	..	..	..	2	..
Other Defined Diseases...	48	10	1	3	3	4	..	6	21
All causes { Certified	182	61	15	7	8	13	8	34	36
{ Uncertified	1	..	..	..	..	..	1	..	..





TABLE IV.

Infantile Mortality during the year 1913

Cause of Death	Under 1 week	1-2 weeks	2-3 weeks	3-4 weeks	Total under 4 weeks	4 weeks and under 3 mths	3 months and under 6 mths	6 months and under 9 mths	9 months & under 12 months	Total Deaths under 1 year
Measles	...	...	...	...	...	...	...	...	1	1
Erysipelas	...	...	...	1	1	...	...	...	...	1
Tuberculous Disease	...	...	...	...	...	...	...	1	...	1
Meningitis	...	...	...	...	...	...	...	...	2	2
Convulsions	...	...	...	...	2	2	2	1	2	9
Bronchitis	...	...	...	...	...	1	...	1	1	3
Pneumonia	...	...	...	...	...	4	4	3	2	13
Gastritis	...	...	...	...	...	...	...	1	...	1
Injury at Birth	...	1	...	...	1	...	...	...	...	1
Congenital Malformations	...	5	...	...	6	1	...	...	...	7
Premature Birth	...	8	...	...	8	...	...	...	...	8
Atrophy, Debility and Marasmus	...	2	1	...	3	4	1	3	3	14
All causes	...	18	1	1	1	12	7	10	11	61

Births in the year { legitimate ... 486  
 { illegitimate ... 19

Deaths in the year { legitimate ... 52  
 { illegitimate ... 9



Vital Statistics from 1896 (a) for the whole District (b) for each Ward.

For Whole District.										For Wards				
Years	Houses occup'd	Populat'n	Birth-rate	Death-rate at all ages	Infant Death-rate		Houses	Populat'n	Birth-rate	Death-rate at all ages	Infant Death-rate			
1896	1704	8520	39'5	18'5	186'9	East Ward	684	3420	45'2	19'3	184'6			
						West "	420	2100	35'1	18'2	170'5			
						South "	600	3000	43'1	18'1	176'9			
1897	1809	8898	44'7	14'4	140'7	East Ward	709	3545	50'2	16'3	118'0			
						West "	460	2300	34'3	10'4	88'6			
						South "	640	3200	44'0	14'4	198'5			
1898	1915	9277	38'1	15'0	152'5	East Ward	708	3540	44'3	15'8	184'7			
						West "	524	2620	34'7	13'3	87'9			
						South "	683	3415	31'0	14'3	160'3			
1899	2033	9655	42'6	16'4	140'7	East Ward	718	3590	50'1	16'1	127'7			
						West "	612	3060	35'2	18'3	194'4			
						South "	703	3515	35'2	12'6	112'9			
1900	2108	10034	39'9	18'9	204'4	East Ward	741	3705	48'8	23'7	243'0			
						West "	645	3225	33'1	20'4	214'9			
						South "	722	3610	31'3	9'9	132'7			
1901	2177	10412	41'2	15'9	167'8	East Ward	756	3872	43'6	15'3	147'9			
						West "	625	3173	39'3	17'3	200'0			
						South "	674	3273	41'2	15'2	162'9			
1902	2299	11495	40'5	15'3	173'8	East Ward	906	4548	45'5	14'3	137'2			
						West "	686	3444	37'4	17'7	237'0			
						South "	707	3549	34'8	14'1	187'9			
1903	2532	12660	39'1	12'1	111'1	East Ward	1065	5325	39'8	10'0	113'2			
						West "	741	3705	39'4	14'0	83'1			
						South "	726	3630	37'8	12'3	138'6			
1904	2751	13755	37'8	12'6	165'0	East Ward	1193	5965	39'9	11'5	163'8			
						West "	804	4020	30'3	11'6	180'3			
						South "	754	3770	42'7	15'6	155'2			
1905	2893	14465	34'2	11'1	127'2	East Ward	1267	6335	33'3	9'7	113'7			
						West "	852	4260	37'7	10'5	130'4			
						South "	774	3870	31'8	12'1	146'3			
1906	3014	15673	32'7	11'3	138'4	East Ward	1313	6828	34'7	9'2	109'7			
						West "	901	4685	33'7	13'4	177'2			
						South "	800	4160	28'3	12'5	144'0			
1907	3087	16052	33'3	10'1	112'1	East Ward	1364	7093	33'2	11'4	126'9			
						West "	916	4763	34'6	9'6	103'0			
						South "	807	4196	31'9	9'7	91'0			
1908	3165	16442	33'0	11'6	139'9	East Ward	1409	7318	37'6	11'4	130'6			
						West "	930	4863	36'1	13'6	157'7			
						South "	820	4261	35'1	12'9	145'4			
1909	3237	16834	34'3	11'1	131'2	East Ward	1458	7564	37'1	11'3	128'8			
						West "	940	4914	36'4	13'8	158'5			
						South "	839	4356	34'6	12'6	141'7			
1910	3269	17000	30'6	12'5	145'8	East Ward	1480	7690	32'3	11'5	136'5			
						West "	945	4934	30'8	14'3	177'6			
						South "	844	4376	27'4	12'3	125'0			
1911 Census	Cor- rected at 3198	Cor- rected at 15379	Cen- sus. 34'2	10'9	132'8	East Ward	1456	7015	44'7	12'1	152'5			
						West "	923	4581	31'7	8'7	107'7			
						South "	819	3782	22'7	10'5	129'0			
1912	3325	Esti- mated 16625	28'5	11'5	123'0	East Ward	1533	7665	30'7	12'2	114'4			
						West "	958	4790	26'1	11'0	104'0			
						South "	834	4170	26'3	9'3	154'5			
1913	3353	16740	30'16	11'7	120'7	East Ward	1537	7685	32'7	12'3	142'8			
						West "	961	4805	28'4	10'1	96'3			
						South "	850	4250	27'4	9'1	101'7			

For comparison—	Births per 1000 Population	Corrected death-rate	
		Deaths under 1 year per 1000	Deaths per 1000 Population
1912 England and Wales ...	23'8	95	13'3
95 Great Towns ...	24'9	101	13'8
146 Smaller Towns ...	23'8	98	12'4
England and Wales less the 241 Towns ...	22'5	86	12'9

The populations for the years 1892—1912 inclusive have been corrected according to the information derived from the censuses for 1891, 1901, and 1911.

The Statistics for England and Wales are those published in the Quarterly Return of the Registrar-General for January, 1913. They are subject to revision when the causes of death and other details shall have been finally classified for publication in the Registrar-General's 75th Annual Report. The alterations, however, are usually very slight.

